

**INSTRUCTIONS  
FOR REQUEST FOR SPECIAL EDUCATION  
PROGRAM TRANSFER FORM**

**PART I - This form is to be completed by the Receiving Program Operator**

Identification — On page 1 of form type or print the following:

1. Name of Receiving Agency
2. Name of Sending Agency
3. Date of request being prepared
4. Effective date of student transfer is to begin
5. Name of the governing body which is the administrative unit of the SELPA (i.e. superintendents council; county office, etc.).

**PART II - Type of Programs and Services being Transferred**

Write the specific types of programs and services being transferred to meet the specific needs of the student(s) in accordance with their IEP.

List the number of students and number of staff for each type of program.

**PART III - Transfer Plan**

Educational programs or services cannot be transferred to another school district or a county office of education unless the special education local plan area has developed a plan for the transfer which addresses, at a minimum, all of the items listed in Part III in accordance with Education Code Section 56207(a) (1) through (7).

Complete and attach a detailed plan that addresses each of the required considerations and describe the activities involved in the program transfer.

**PART IV - Administrative Approval and Three Entity Certifications**

The sending agency, the receiving agency and the governing body of the SELPA of which the agencies are members, are required to sign Part IV. If *only* two of the three entities agree to the transfer, the matter will be resolved by the alternative resolution process established pursuant to Education Code 56205, (b)(5).

**PART V - Summary Sheet**

This page is for CDE Special Education Division Use Only.

## REQUEST FOR SPECIAL EDUCATION PROGRAM TRANSFER

*Note: This form to be completed by the Receiving Agency*

<b>PART I - Identification</b>		<b>Education Code (EC) 56207</b>	
<b>1. Receiving Agency</b>	<b>2. Sending Agency</b>		
<b>3. Date of Request</b>	<b>4. Effective Date of Transfer</b>		
<b>PART II - List type of programs and services being transferred:</b>		<b>Number of:</b>	
		Staff	Students
A. Description of Program			
B. If partial transfer of program, please list type of program and services remaining:			

## REQUEST FOR SPECIAL EDUCATION PROGRAM TRANSFER

### PART III – Provide a detailed plan for the program transfer that complies with Section 56207(a) and other procedural safeguards.

#### A. Assurances of compliance with Section 56207(a).

*Instructions: Please provide a detailed narrative which reflects the planning process for the program transfer. Include in each section of the narrative the effect of the proposed transfer on both students being transferred and students remaining in the current program, if any students are remaining. Respond to examples only where they are applicable. Submit Part III (A) to CDE for approval prior to implementation of the program transfer.*

1. Section 56207(a)(1) and (3) – pupil needs and the continuation of the current individualized education program for all affected students. If the proposed transfer involves a change in personnel or the site of service, please provide a detailed plan focusing on the following areas. Respond to examples only where applicable.

(a) **Direct Instruction** — examples include:

- The number (FTEs) and qualifications of all certificated and classified staff providing specialized instruction;
- The continuation of assessments, either standardized or alternate, that will be used to measure pupil progress.

(b) **Related Services and Equipment** — examples include:

- The number (FTEs) and qualifications of all certificated and classified staff providing related services or designated instruction and services;
- The continuation of appropriate transportation services;
- The transfer of assistive technology or low-incidence equipment.

(c) **Facilities** — examples include:

- The availability of physical therapy facilities or other specially modified facilities, if appropriate;
- The square foot of instructional space per student.

(d) **Services from Non-Educational Agencies** — examples include:

- The continuation of appropriate inter-agency agreements.

**PART III – Provide a detailed plan for the program transfer that complies with Section 56207(a) and other procedural safeguards. (continued)**

2. Section 56207(a)(2) and (4) – the availability of the full continuum of program placements and services for all affected students and the provision of services in the least restrictive environment from which pupils can benefit. If the proposed transfer involves a change in personnel or the site of service, please provide a detailed plan focusing on the following areas. Respond to examples only where applicable.
- (a) Contingency plans for providing placements or services other than those called for in the IEPs of current pupils. Examples include:
- Specific regional programs or nonpublic schools that will be available to serve students who cannot be served by the proposed program configuration;
  - Opportunities for participation in the general education class and curriculum, if such participation were required by a student's IEP.
- (b) If involves students with low-incidence disabilities, complete and attach the self-review guide in the Department's Program Guidelines for the relevant disability category.
3. Section 56207(a)(5) – the maintenance of all appropriate support services. If the proposed transfer involves a change in personnel or the site of service, please provide a detailed plan focusing on the following areas. Respond to examples only where applicable.
- (a) Number (FTEs), qualifications, and experience of support staff. Examples include:
- Psychologists
  - Program specialists
- (b) Availability of other support services. Examples include:
- Financial services
  - Administrative support
4. Section 56207(a)(7) – the involvement and representation of parents of all affected students and staff in the planning process. If the proposed transfer involves a change in personnel or the site of service, please provide a detailed plan focusing on the following areas. Respond to examples only where applicable.
- (a) Involvement of parents. Examples include:
- The number of public meetings to which parents were invited and attended;
  - The number of parents attending meetings;
  - How and to whom invitations were transmitted;
  - Evidence (such as minutes or agendas) that the information requested in numbers 1, 2, and 3 were discussed during those meetings;
- (b) Involvement of staff. Examples include:
- Special and non-special education staff (such as teachers, administrators, and classified staff) who might be affected by the transfer in the planning process.

**PART III – Provide a detailed plan for the program transfer that complies with Section 56207(a) and other procedural safeguards. (continued)**

**B. Procedural Safeguards Checklist.**

*Instructions: Please complete this portion and submit with either the SELPA's annual service and budget plan, pursuant to Section 56205, or the SELPA's transition documents, pursuant to Section 56836.03, as appropriate. Submit this section subsequent to implementation of the program transfer. This form serves as notification and assurance that the program transfer has been completed with appropriate procedural safeguards.*

- ☐ IEP team meetings have been held for each affected student and IEPs have been completed reflecting the new program operator and any change in program configuration.
- ☐ Inter-agency agreements have been completed with all appropriate non-educational agencies. Signing this document is an affirmation that this process has been completed and assures that agreements are in place for students to receive services specified in their IEPs that are the responsibility of non-educational agencies.
- ☐ Each LEA has complied with provisions of the Education Code, such as Section 44903.7, relating to the rights of employees affected by the transfer.

#### **PART IV - Administrative Approval and Certifications of All Three Entities**

**Important Note:** All entities involved in the program transfer are advised to read the following requirements prior to signing below.

- I. The sending agency, the receiving agency and the governing body of the Special Education Local Plan Area (SELPA) of which the agencies are members, agree to the transfer.
2. In addition, by signing this form, all signatories assure that:
  - a. Special Education instruction and related services provided by each affected LEA comply with all state and federal requirements;
  - b. the level of services and the opportunity of the affected students to interact with the general school population is not diminished as a result of the program transfer; and
  - c. the transfer is consistent with all SELPA policies and the local plan.
3. If either the sending or receiving agency disagree with the proposed transfer, the matter will be resolved by the alternative resolution process established pursuant to Education Code Section 56207( c ).

#### **CERTIFICATIONS**

Sending Program Operator Name	Date
Authorized Signature	Telephone
Receiving Program Operator Name	Date
Authorized Signature	Telephone
Governing Body of SELPA	Date
Authorized Signature	Telephone

**MAIL ORIGINAL PROGRAM TRANSFER FORMS TO:**  
California State Department of Education, Special Education Division  
**Attention: Greg Hudson**  
**515 L Street, Suite 270**  
**Sacramento, CA 95814**  
Telephone (916) 445-4544 Fax (916) 327-3516

**PROPOSED PROGRAM TRANSFER REQUEST  
SUMMARY SHEET**

***NOTE: For CDE Special Education Division Use Only***

<b>PART V - Program Transfer Request Summary</b>		
Receiving Agency	Sending Agency	
Pending due to		
Site Visit Findings, if applicable		
List of Program and Services being Transferred	Number of Staff	Number of Students
<b>CDE Recommendation:</b> {    } Approve                      {    } Deny		
Staff Name	Signature	Date
Administrator Name	Signature	Date
Division Director	Signature	Date